

BIPARTISAN
**ADDICTION AND
MENTAL HEALTH**
TASK FORCE

2021 – 2022



**2021
LEGISLATIVE
AGENDA**

—
117TH CONGRESS

Rep. Ann McLane Kuster (NH-02)
Democrat, Co-Chair

Rep. Brian Fitzpatrick (PA-01)
Republican, Co-Chair

Rep. David Trone (MD-06)
Democrat, Co-Chair

Rep. Jaime Herrera Beutler (WA-03)
Republican, Co-Chair

A message from the co-chairs:

Our work has never been more important.

The COVID-19 pandemic has had devastating health and economic consequences for those across the country, and the more we learn about the magnitude of our nation's mental health and addiction crisis, the more obvious it becomes that further, evidence-based legislative steps must be taken.

That's why we created the Bipartisan Addiction and Mental Health Task Force, and what this 2021 legislative agenda seeks to achieve in the 117th Congress. For the past few decades, Congress has been working to address the ongoing substance use crisis. While common-sense measures have been enacted that have helped save lives, there is still more to be done to increase access to recovery resources, end the stigma surrounding addiction and mental health, and finally put an end to this epidemic.

As the co-chairs of the Task Force, we are working across the aisle with our colleagues to advance new policies and revisit old ones to support those struggling with mental health and substance use, build the public health infrastructure needed to address the addiction crisis, and create safeguards against the flow of dangerous drugs in our communities.

We are proud of the work we have accomplished on a bipartisan basis since establishing the Task Force earlier this year, and we look forward to the work that's yet to come to finally put this crisis behind us.

Sincerely,

Ann McLane Kuster (D-NH)

Brian Fitzpatrick (R-PA)

David Trone (D-MD)

Jaime Herrera Beutler (R-WA)

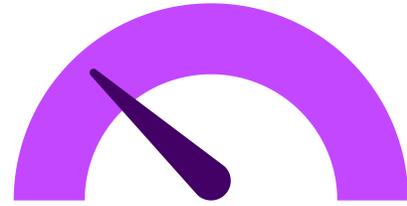


ADDICTION + OVERDOSE NUMBERS IN 2020

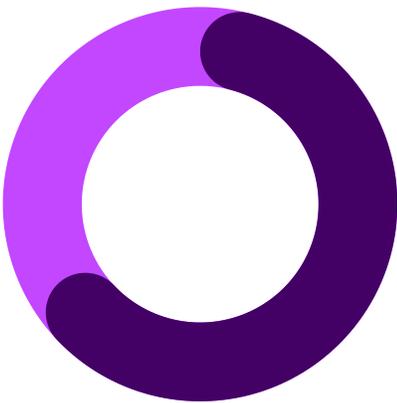
WHERE WE STAND



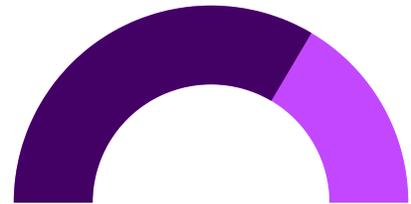
In 2020, more than 93,000 people died of a drug overdose in the U.S.



Overdose deaths involving opioids reached 69,710 in 2020, up from 50,963 in 2019.



More than 900,000 people have died of overdoses since the U.S. drug epidemic began in about 1999.



70% of cocaine overdose deaths and 50% of methamphetamine overdose deaths in 2020 also involved fentanyl.

Source: <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>



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- H.R. 2929 Virtual Peer Support Act
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- The Community Re-Entry through Addiction Treatment to Enhance (CREATE) Opportunities Act (Rep. Ann McLane Kuster (D-NH))



WHERE WE'RE GOING

H.Con.Res. 42, *Expressing the sense of Congress that governmental entities should use a portion of the proceeds from litigation against opioid manufacturers and distributors to increase participation in drug take back programs and for the safe disposal of collected, unused medicines*
Rep. David McKinley (R-WV)

Encourage state and local governments to use a portion of proceeds from any litigation against opioid manufacturers/distributors to increase participation in drug take back programs to facilitate safe disposal of unused medications.

Co-Lead(s): Rep. David Trone (D-MD)

Co-Sponsors: 6

Status: Referred to the House Committee on Energy and Commerce

H.R. 434, *Preventing Mental Health and Substance Use Crises During Emergencies Act*
Rep. David Trone (D-MD)

Create a joint task force to prevent mental health crises triggered by public health emergencies and direct the Department of Health and Human Services to assess the federal government's response to the impacts of COVID-19 and create a national strategy to help manage future mental health crises.

Co-Lead(s): Rep. Steve Womack (R-AR)

Co-Sponsors: 5

Status: Referred to the House Committee on Energy and Commerce



H.R. 586, *Suicide Training and Awareness Nationally Delivered for Universal Prevention (STANDUP) Act of 2021*
Rep. Scott Peters (D-CA)

Require state, tribal, and local educational agencies that receive funding for mental health, including through the Project AWARE State Education Agency Grant Program, to establish evidence-based suicide awareness and prevention training. The Substance Abuse and Mental Health Services Admin, in coordination with Department of Education and Bureau of Indian Education, must provide educational agencies with best practices for these trainings.

Co-Lead(s): Reps. Brian Fitzpatrick (R-PA), Gus Bilirakis (R-FL), and Ted Deutch (D-FL)

Co-Sponsors: 46



Status: Passed in the House and referred to the Senate Committee on Health, Education, Labor, and Pensions

H.R. 1716, *COVID-19 Mental Health Research Act*
Rep. Paul Tonko (D-NY)

Fund research to study the effects the COVID-19 pandemic has on the mental health of Americans, with an emphasis on its impact on children and health care providers.

Co-Lead(s): Rep. John Katko (R-NY)

Co-Sponsors: 25

Status: Referred to the House Committee Energy and Commerce



H.R. 2366, *Support, Treatment, and Overdose Prevention of (STOP) Fentanyl Act*
Rep. Ann McLane Kuster (D-NH)

Bolster surveillance and research, deploy resources to combat overdose deaths, connect individuals with treatment programs, and support ongoing prevention and public safety activities.

Co-Lead(s): Reps. Lisa Blunt Rochester (D-DE) & Don Bacon (R-NE)

Co-Sponsors: 7

Status: Referred to the House Committee Energy and Commerce; Judiciary

H.R. 3226, *Accurate Reporting of Smoking Variants Act*
Rep. David Trone (D-MD)

Require the National Coordinator for Health Information Technology to ensure that Electronic Health Records allow doctors to record vaping and e-cigarette use, just like the records allow for cigarettes and cigars, to allow health care providers and researchers to better understand the prevalence of e-cigarette usage, the long-term health impacts of these products, and develop strategies to curb vaping among young people.

Co-Lead(s): Reps. Raja Krishnamoorthi (D-IL), and Chris Stewart (R-UT)

Co-Sponsors: 5

Status: Referred to the House Committee on Energy and Commerce



WHERE WE'RE GOING

H.R. 588, *Stopping the Mental Health Pandemic Act* **Rep. Katie Porter (D-CA)**

Require the Substance Abuse and Mental Health Services Administration to award grants to states, tribal nations, local governments, behavioral health and primary care providers, and community organizations to support behavioral health treatment and services during the COVID-19 pandemic.

Co-Lead(s): Sens. Tina Smith (D-MN) and Lisa Murkowski (R-AK)

Co-Sponsors: 31

Status: Referred to the House Committee Energy and Commerce

H.R. 593, *Coronavirus Mental Health and Addiction Assistance Act of 2021* **Rep. Tim Ryan (D-OH)**

Require the Substance Abuse and Mental Health Services Administration to award grants to establish a network of entities that provide mental health and substance use disorder programs during the COVID-19 pandemic. Eligible entities include tribal nations, nonprofit organizations, service providers, and partnerships of two or more eligible entities.

Co-Lead(s): Rep. John Katko (R-NY)

Co-Sponsors: 12

Status: Referred to the House Committee on Energy and Commerce



H.R. 1205, *Improving Mental Health Access from the Emergency Department Act of 2021*
Rep. Raul Ruiz (D-CA)

Authorizes a grant program for emergency departments to increase access to follow-up psychiatric services for individuals who present for care of acute mental-health episodes. The Substance Abuse and Mental Health Services Administration may award these grants.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 1



Status: Passed in the House and referred to the Senate Committee on Health, Education, Labor, and Pensions

H.R. 1385, *Behavioral Health Coordination and Communication Act of 2021*
Rep. David Trone (D-MD)

Create an Interagency Coordinator to address the currently disjointed federal efforts and foster constant communication among all relevant agencies and departments, with the goal of focusing the federal government's approach to mental health and substance use disorders.

Co-Lead(s): Reps. Tom Emmer (R-MN), Doris Matsui (D-CA), Paul Tonko (D-NY), and Tony Cárdenas (D-CA)

Co-Sponsors: 17

Status: Referred to the House Committee on Energy and Commerce



H.R. 2376, *Excellence in Recovery Housing Act*
Rep. David Trone (D-MD)

Require the Substance Abuse and Mental Health Services Administration (SAMHSA), along with national accrediting entities and reputable providers of recovery housing services, to develop guidelines for states to promote the availability of high-quality recovery housing.

Co-Lead(s): Reps. Judy Chu (D-CA), Mike Levin (D-CA), and David McKinley (R-WV)

Co-Sponsors: 6

Status: Referred to the House Committee on Energy and Commerce

H.R. 2379, *State Opioid Response Grant Authorization Act*
Rep. David Trone (D-MD)

Authorizes State Opioid Response (SOR) Grants and Tribal Opioid Response (TOR) Grants for 6 years. It authorizes \$1.585 billion per year, which includes \$79 million for TOR grants. The money distributed through these grants has helped to provide additional treatment beds, hire the workforce necessary to expand treatment and recovery options, bridge gaps identified in systems of care, support robust prevention campaigns, as well as many other responses.

Co-Lead(s): Rep. Mikie Sherrill (D-NJ)

Co-Sponsors: 6

Status: Ordered to be Reported (Amended) by Voice Vote



H.R. 2929, *Virtual Peer Support Act*
Rep. Susie Lee (D-NV)

Create a \$50 million grant program to help behavioral health organizations implement or expand their virtual peer support programs and build out their current online capacity. Virtual peer support programs have been proven to be a cost-effective way of providing consistent mental health support, reducing psychiatric hospitalizations, reducing outpatient visits, and giving people living with behavioral conditions a place to build community, share coping skills, and offer support to assist one another in their recovery journeys.

Co-Lead(s): Rep. Fred Upton (R-MI)

Co-Sponsors: 18

Status: Referred to the House Committee on Energy and Commerce

H.R. 4305, *Crisis Care Enhancement Act*
Rep. Cheri Bustos (D-IL)

Improve availability and capacity of crisis call centers, mobile crisis services, and crisis stabilization programs across the country by requiring states to use a larger portion of funds from the federal Mental Health Block Grant towards these services. Specifically, the bill requires states to set aside 10% of these funds once funding for the overall block grant reaches a certain threshold.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 2

Status: Referred to the House Committee on Energy and Commerce



H.R. 4323, *Excellence in Mental Health and Addiction Treatment Act of 2021*

Rep. Doris Matsui (D-CA)

Allow every state the option of joining the innovative Certified Community Behavioral Health Clinic (CCBHC) demonstration and authorize investments in the model for current and prospective CCBHCs.

Co-Lead(s): Reps. Markwayne Mullin (R-OK), Angie Craig (D-MN), David McKinley (R-WV), Brian Fitzpatrick (R-PA), and Paul Tonko (D-NY)

Co-Sponsors: 18

Status: Referred to the House Committee on Energy and Commerce

H.R. 4341, *Comprehensive Addiction and Recovery Act (CARA) 3.0*

Rep. David Trone (D-MD)

Aimed at mitigating the effects of COVID-19 on the addiction epidemic and would build on the original Comprehensive Addiction and Recovery Act (CARA) of 2016 and CARA 2.0 of 2018 by increasing funding for prevention, education, research, treatment, and recovery.

Co-Lead(s): Reps. Ann McLane Kuster (D-NH), Brian Fitzpatrick (R-PA), Jaime Herrera Beutler (R-WA), Tim Ryan (D-OH), David McKinley (R-WV), Paul Tonko (D-NY), and Dave Joyce (R-OH)

Co-Sponsors: 49

Status: Referred to House Committee on Energy and Commerce; Judiciary; Ways and Means; Education and Labor; Financial Services; Agriculture



H.R. 4649, *SUPPORT for Mental Health Act*
Rep. Dusty Johnson (R-SD)

Allow states, territories, and tribes to use funds provided for COVID-19 relief to create a trust fund to support State and Tribal-based mental and behavioral health. Essentially, this bill expands the flexibility of already-appropriated COVID relief funds to address the mental health needs of our nation.

Co-Lead(s): Rep. Kim Schrier (D-WA)

Co-Sponsors: 1

Status: Referred to the House Committee on Oversight and Reform

H.R. 4897, *Support Recovery From Addiction Act*
Rep. Abigail Spanberger (D-VA)

Authorize a ten percent set aside for recovery support services within the Substance Abuse Block Grant program. This set-aside is consistent with the provisions in the President's FY22 budget and the FY22 Labor bill.

Co-Lead(s): Rep. David McKinley (R-WV)

Co-Sponsors: 4

Status: Referred to the House Committee on Energy and Commerce



H.R. 5218, *Collaborate in an Orderly and Cohesive Manner (COCM) Act*
Rep. Lizzie Fletcher (D-TX)

Provide grants to primary care providers to invest in the Collaborative Care Model, a specific care delivery model that integrates behavioral health care within the primary care setting for the treatment of mental health and substance use disorders that require regular follow-up, like depression, anxiety, and substance abuse.

Co-Lead(s): Rep. Jaime Herrera Beutler (R-WA)

Co-Sponsors: 1

Status: Referred to the House Committee on Energy and Commerce



RURAL + UNDERSERVED COMMUNITIES

2021
2022

WHERE WE'RE GOING

H.R. 2228, *Rural Behavioral Health Access Act* **Rep. Dan Kildee (D-MI)**

Allow Medicare to continue to provide payment for tele-behavioral health services at rural Critical Access Hospitals (CAHs) when the patient is not located in the hospital.

Co-Lead(s): Rep. Brad Wenstrup (R-OH)

Co-Sponsors: 4

Status: Referred to the House Committee on Energy and Commerce; Ways and Means

H.R. 5141, *Maximizing Outcomes through Better Investments in Lifesaving Equipment for (MOBILE) Health Care Act* **Rep. Susie Lee (D-NV)**

Expand allowable use criteria of the New Access Point grant program for Federally-Qualified Health Centers (FQHCs) to include mobile clinics and building renovation, acquisition, or construction costs to increase access to affordable, quality care in rural, underserved, and hard-to-reach communities.

Co-Lead(s): Reps. Jaime Herrera Beutler (R-WA), Raul Ruiz (D-CA), and Richard Hudson (R-NC)

Co-Sponsors: 3

Status: Referred to the House Committee on Energy and Commerce



WORKFORCE + WORKFORCE DEVELOPMENT

2021
2022

WHERE WE'RE GOING

H.R. 1475, *Pursuing Equity in Mental Health Act* **Rep. Bonnie Watson Coleman (D-NJ)**

Establish and expand programs to address racial and ethnic disparities in mental health—require Department of Health and Human Services (HHS) to award grants to establish interprofessional behavioral health care teams in areas with a high proportion of racial and ethnic minority groups.

Co-Lead(s): Rep. John Katko (R-NY)

Co-Sponsors: 62



Status: Passed in the House and referred to the Senate Committee on Health, Education, Labor, and Pensions

H.R. 1667, *The Dr. Lorna Breen Health Care Provider Protection Act* **Rep. Susan Wild (D-PA)**

Comprehensive, bipartisan, and bicameral legislation to reduce and prevent suicide, burnout, and mental and behavioral health conditions among health care professionals. Additionally, it supports training for health professionals to prevent suicide and burnout, as well as increase awareness about suicide and mental health concerns among health care professionals.

Co-Lead(s): Reps. Raja Krishnamoorthi (D-IL), Judy Chu (D-CA), David McKinley (R-WV)

Co-Sponsors: 126

Status: Referred to the House Committee on Energy and Commerce



WORKFORCE + WORKFORCE DEVELOPMENT

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H.R. 2067, Medication Access and Training Expansion (MATE) Act **Rep. Lori Trahan (D-MA)**

Implement a one-time, 8-hour training on identifying, treating, and managing patients with substance use disorders for all controlled medication prescribers.

Co-Lead(s): Reps. Jack Bergman (R-MI), Buddy Carter (R-GA), David Trone (D-MD), Hal Rogers (R-KY), and Ann McLane Kuster (D-NH)

Co-Sponsors: 15

**Status: Referred to the House Committee on Energy and Commerce;
Judiciary**

H.R. 3150, Mental Health Professionals Workforce Shortage Loan Repayment Act of 2021 **Rep. John Katko (R-NY)**

Repays up to \$250,000 in eligible student loan repayment for mental health professionals who work in mental health professional shortage areas. Repays one-sixth of the individual's eligible loans for each year of service.

Co-Lead(s): Rep. Grace Napolitano (D-CA)

Co-Sponsors: 8

Status: Referred to the House Committee on Energy and Commerce



WORKFORCE + WORKFORCE DEVELOPMENT

2021
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H.R. 3441, *Substance Use Disorder Workforce Act* *Rep. Brad Schneider (D-IL)*

Make available 1,000 new Medicare-supported residency positions to hospitals that have, or are in the process of establishing, approved residency programs in addiction medicine, addiction psychiatry, or pain medicine.

Co-Lead(s): **Reps. Ann McLane Kuster (D-NH), David McKinley (R-WV)**

Co-Sponsors: **24**

Status: **Referred to the Committee on Ways and Means; Energy and Commerce**



FIRST RESPONDERS + PUBLIC SAFETY

2021
2022

WHERE WE'RE GOING

H.R. 3070, *Confidentiality Opportunities for Peer Support Counseling (COPS) Act* **Rep. David Trone (D-MD)**

Provide confidentiality to federal law enforcement officers by prohibiting persons who participate in peer support sessions from disclosing any communication that occurred during a session, with clear exceptions to confidentiality in necessary circumstances.

Co-Lead(s): Rep. Guy Reschenthaler (R-PA)

Co-Sponsors: 16

Status: Referred to the House Committee on the Judiciary

H.R. 3071, *Public Safety Officer Support Act* **Rep. David Trone (D-MD)**

Recognize PTSD as a condition that can be as debilitating as physical injuries that prevent officers from performing their job, and create an avenue for officers to seek disability benefits for PTSD linked to severe trauma. It would also expand the Public Safety Officer Benefit program by allowing for officers lost as a result of suicide or disabled by PTSD or attempted suicide to apply for benefits.

Co-Lead(s): Rep. Guy Reschenthaler (R-PA)

Co-Sponsors: 1

Status: Referred to the House Committee on the Judiciary



H.R. 3595, *Law Enforcement Training for Mental Health Crisis Response Act of 2021*

Rep. Marcy Kaptur (D-OH)

Authorize a grant program for law enforcement agencies and corrections agencies to obtain behavioral health crisis response training for law enforcement officers and corrections officers, and for other purposes.

Co-Lead(s): Reps. Tim Ryan (D-OH), Anthony Gonzalez (R-OH), Stephanie Bice (R-OK), Elaine Luria (D-VA), Dave Joyce (R-OH), Val Demings (D-FL), Van Taylor (R-TX), and Henry Cuellar (D-TX)

Co-Sponsors: 8

Status: Referred to the House Committee on the Judiciary

H.R. 4565, *Protecting First Responders from Secondary Exposure Act* **Rep. Dave Joyce (R-OH)**

Make the training and use of containment devices to prevent secondary exposure to fentanyl and other potentially lethal substances an eligible purchase under the Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP).

Co-Lead(s): Rep. David Trone (D-MD)

Co-Sponsors: 4

Status: Referred to the House Committee on the Judiciary



WHERE WE'RE GOING

H.R. 768, *Block, Report, And Suspend Suspicious Shipments Act of 2021* **Rep. David McKinley (R-WV)**

Creates additional requirements for drug manufacturers and distributors who discover a suspicious order for controlled substances. In addition to reporting the suspicious order to the Drug Enforcement Administration (DEA), a manufacturer or distributor must also exercise due diligence and decline to fill the order. The DEA must issue regulations specifying the indicators that give rise to a suspicious order.

Co-Lead(s): Rep. Debbie Dingell (D-MI)

Co-Sponsors: 2



Status: Passed in the U.S. House of Representatives and referred to the Senate Committee on the Judiciary

H.R. 2051, *Methamphetamine Response Act* **Rep. Scott Peters (D-CA)**

Designates methamphetamine as an emerging drug threat (a new and growing trend in the use of an illicit drug or class of drug). It also directs the Office of National Drug Control Policy to implement a methamphetamine response plan.

Co-Lead(s): Rep. John Curtis (R-UT)

Co-Sponsors: 2

Status: Ordered to be Reported by Voice Vote



H.R. 2538, *Fighting Emerging Narcotics Through Additional Nations to Yield Lasting (FENTANYL) Results Act*
Rep. David Trone (D-MD)

Creates program to help countries improve forensic detection capabilities for fentanyl and other synthetic opioids, establishes international exchange program for drug demand reduction experts and additional reporting requirements in International Narcotics Control Strategy Report, and modifies provisions to facilitate global cooperation against synthetic drug trafficking.

Co-Lead(s): Rep. Michael McCaul (R-TX)

Co-Sponsors: 8

Status: Ordered to be Reported by Voice Vote

H.R. 4459, *Stop the Importation and Manufacturing of Synthetic Analogues Act of 2021 (SIMSA)*
Rep. John Katko (R-NY)

Establishes a new schedule under the Controlled Substances Act, Schedule A. The new schedule provides an expedited pathway for law enforcement to regulate the import and export of dangerous synthetic drugs. This legislation provides pathways to maintain legitimate research with covered substances.

Co-Lead(s): Rep. Kathleen Rice (D-NY)

Co-Sponsors: 3

Status: Referred to Committee on Energy and Commerce; Judiciary



WHERE WE'RE GOING

H.R. 433, *Family Support Services for Addiction Act* **Rep. David Trone (D-MD)**

Create a grant program to assist non-profit organizations that provide family support services for addiction treatment, ensuring that families can access the treatment option that is right for their loved one.

Co-Lead(s): Rep. Dan Meuser (R-PA)

Co-Sponsors: 25



Status: Passed in the House and referred to the Senate Committee on Health, Education, Labor, and Pensions

H.R. 721, *Mental Health Services for Students Act of 2021* **Rep. Grace Napolitano (D-CA)**

Provides specific statutory authority for the Project AWARE (Advancing Wellness and Resiliency in Education) State Educational Agency Grant Program that is administered by the Substance Abuse and Mental Health Services Administration. The program supports school-based mental health services, including screening, treatment, and outreach programs.

Co-Lead(s): Rep. John Katko (R-NY)

Co-Sponsors: 86



Status: Passed in the House and referred to the Senate Committee on Health, Education, Labor, and Pensions



H.R. 909, *Moms Matter Act*
Rep. Lisa Blunt Rochester (D-DE)

Establishes two grant programs to address maternal mental health conditions and substance use disorders, with a focus on racial and ethnic minority groups.

Co-Sponsors: 50

Status: Referred to the House Committee on Energy and Commerce

H.R. 2747, *Help Grandfamilies Prevent Child Abuse Act*
Rep. Mary Gay Scanlon (D-PA)

A growing consequence of the substance use disorder crisis is an increasing number of grandparents raising their grandchildren because the children's parents passed away or are absent due to substance use disorders. This bipartisan legislation would help address the unique challenges that face grandfamilies and all kinship families, including ensuring that these families are eligible for services under the *Child Abuse Prevention and Treatment Act* (CAPTA) and providing support to meet the unique needs of children who have experienced trauma, including exposure to substance misuse.

Co-Lead(s): Rep. Glenn Thompson (R-PA)

Co-Sponsors: 1

Status: Referred to the House Committee on Education and Labor



H.R. 3572, *Increasing Access to Mental Health in Schools Act*
Rep. Judy Chu (D-CA)

Establish grant program to increase number of mental health professionals at low-income schools by supporting partnerships between institutions of higher education and local education agencies to support teaching, training, and employment of school counselors, social workers, and psychologists.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 22

Status: Referred to the House Committee on Education and Labor

H.R. 4943, *Children's Mental Health Infrastructure Act*
Rep. Lisa Blunt Rochester (D-DE)

Provide funding to children's hospitals for additional pediatric care capacity for behavioral and mental health services; Support costs associated with reallocating existing resources, including converting general beds to accommodate behavioral health patients, creating new capacity for "day hospital" care, and supporting the associated costs of meeting safety standards to protect children and adolescents.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 10

Status: Referred to the House Committee on Energy and Commerce



H.R. 4944, *Helping Kids Cope Act*
Rep. Lisa Blunt Rochester (D-DE)

Provides funding to support pediatric behavioral health care integration and coordination, and to support training and other workforce innovations at children's hospitals, pediatric delivery settings, and other settings.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 10

Status: Referred to the House Committee on Energy and Commerce



WHERE WE'RE GOING

H.R. 1309, *Supporting Eating Disorders Recovery Through Vital Expansion (SERVE) Act*

Rep. Seth Moulton (D-MA)

Ensure TRICARE, the military's health insurance program, provides members of the military and their families with comprehensive treatment for eating disorders.

Co-Lead(s): Rep. Brian Mast (R-FL)

Co-Sponsors: 48

Status: Referred to House Committee on Armed Services; Veterans' Affairs

H.R. 3942, *Brandon Act*

Rep. Seth Moulton (D-MA)

Allow service members to anonymously report and seek mental health treatment by using a safe word like "Brandon Act."

Co-Lead(s): Rep. Mariannette Miller-Meeks (R-IA)

Co-Sponsors: 10

Status: Referred to the House Committee on Armed Services



H.R. 4575, *Veteran Peer Specialist Act of 2021*
Rep. Scott Peters (D-CA)

Expand peer specialist program to all VA medical centers over five years by initiating the program at 25 medical centers per year, at each facility hiring two peer specialists, and ensuring diversity in the hiring of peer specialists.

Co-Lead(s): Reps. Colin Allred (D-TX) and Tracey Mann (R-KS)

Co-Sponsors: 7

Status: Referred to the House Committee on Veterans' Affairs



WHERE WE'RE GOING

H.R. 280, PDMPs Help Patients Act of 2021 *Rep. David McKinley (R-WV)*

Creates a pilot program to integrate a treatment locator tool into PDMP's to allow for immediate treatment referral by a health care provider.

Co-Lead(s): Rep. Lisa Blunt Rochester (D-DE)

Co-Sponsors: 4

Status: Referred to the House Committee on Energy and Commerce

H.R. 1185, Opioid Patients' Right to Know Act of 2021 *Rep. David Trone (D-MD)*

Create a grant program to incentivize states to require prescribers to discuss the addictive qualities of opioids with patients and inform them of alternative treatment options before prescribing opioids for acute pain.

Co-Lead(s): Reps. Guy Reschenthaler (R-PA), Teresa Leger Fernandez (D-NM), and David McKinley (R-WV)

Co-Sponsors: 7

Status: Referred to the House Committee on Energy and Commerce



H.R. 1384, *Mainstreaming Addiction Treatment (MAT) Act*
Rep. Paul Tonko (D-NY)

Eliminate the outdated requirement that practitioners apply for a separate waiver (the x-waiver) through the Drug Enforcement Administration to prescribe buprenorphine for the treatment of substance use disorder.

Co-Lead(s): Rep. Mike Turner (R-OH)

Co-Sponsors: 117

Status: Referred to the House Committee on Energy and Commerce; Ways and Means; Judiciary

H.R. 5086, *Safe Disposal of Opioids Act of 2021*
Rep. Suzanne Bonamici (D-OR)

Help prevent drug abuse by creating a grant program to establish and maintain approximately 10,000 prescription drug disposal bins across the country. Disposal bins will be placed in community pharmacies and other health care settings where patients receive medication.

Co-Lead(s): Rep. Alex Mooney (R-WV)

Co-Sponsors: 5

Status: Referred to the House Committee on Energy and Commerce



H.R. 5224, *Preventing Overdoses and Saving Lives Act of 2021*
Rep. French Hill (R-AR)

Create a grant program that allows states and localities to conduct research on the opioid crisis, create a strategic plan on their response to the opioid crisis, and implement co-prescribing in their jurisdiction.

Co-Lead(s): Rep. Debbie Dingell (D-MI)

Co-Sponsors: 1

Status: Referred to the House Committee on Energy and Commerce



EDUCATION + STIGMA REDUCTION

2021
2022

WHERE WE'RE GOING

H.Res. 617, Supporting the designation of September 2021 as "National Recovery Month"

Rep. David Trone (D-MD)

Celebrates the more than 21 million individuals in recovery in the United States, the many health care professionals and peers who help others engage in their own journey into recovery, and the millions of recovery allies who support the individuals in recovery.

Co-Lead(s): Reps. Ann McLane Kuster (D-NH), Brian Fitzpatrick (R-PA), and Jaime Herrera Beutler (R-WA)

Co-Sponsors: 21

Status: Referred to the House Committee on Energy and Commerce

H.R. 2352, Honoring National Recovery Month Act

Rep. David Trone (D-MD)

Provide \$1 million annually for SAMHSA to develop materials, distribute best practices, and lead activities related to Recovery Month. The legislation provides SAMHSA with the flexibility for funds to be used by a national organization for Recovery Month activities.

Co-Lead(s): Reps. Ann McLane Kuster (D-NH), Brian Fitzpatrick (R-PA), and Jaime Herrera Beutler (R-WA)

Co-Sponsors: 7

Status: Referred to the House Committee on Energy and Commerce



EDUCATION + STIGMA REDUCTION

2021
2022

H.R. 4244, *Stopping Titles that Overtly Perpetuate (STOP) Stigma Act* **Rep. David Trone (D-MD)**

Direct the Secretary of Health and Human Services to provide recommendations for name changes for eight agencies and one grant whose names contain stigmatizing language, including the Substance Abuse and Mental Health Services Administration. It would also direct the Secretary to provide a cost assessment for the name changes and to provide opportunities for relevant stakeholder groups to provide input on the recommendations.

Co-Lead(s): Rep. Lisa McClain (R-MI)

Co-Sponsors: 1

Status: Referred to the House Committee on Energy and Commerce

H.R.5242, *Opioid Settlement Accountability Act* **Rep. David McKinley (R-WV)**

Ensures the funds that states receive from opioid settlements are used for opioid treatment, prevention, education, and enforcement.

Co-Lead(s): Rep. Marcy Kaptur (D-OH)



WHERE WE'RE GOING

H.R. 432, *Mental Health Access Improvement Act of 2021*

Rep. Mike Thompson (D-CA)

Provides coverage of marriage & family therapist and mental health counselor services under Medicare. Excludes such services from the skilled nursing facility prospective payment system, authorizes marriage & family therapists, mental health counselors to develop post-hospital services discharge plans.

Co-Lead(s): Rep. John Katko (R-NY)

Co-Sponsors: 42

Status: Referred to the House Committee on Energy and Commerce; Ways and Means

H.R. 955, *Medicaid Reentry Act*

Rep. Paul Tonko (D-NY)

Empower states to restore Medicaid eligibility for incarcerated individuals up to 30 days before their release to ensure those transitioning will have immediate access to critical services including mental health support, addiction treatment and COVID testing.

Co-Lead(s): Reps. Mike Turner (R-OH), David Trone (D-MD) and David McKinley (R-WV)

Co-Sponsors: 40

Status: Referred to the House Committee on Energy and Commerce



H.R. 1647, *Telehealth Response for E-prescribing Addiction Therapy Services (TREATS) Act*
Rep. David McKinley (R-WV)

Modify coverage requirements of certain telehealth services under Medicare. Permanently allow telehealth services for substance use disorders and mental health disorders to be provided via audio-only technology, if a physician or practitioner has already conducted an in-person or video telehealth evaluation.

Co-Lead(s): Reps. Ted Budd (R-NC), David Cicilline (D-RI), and David Trone (D-MD)

Co-Sponsors: 6

Status: Referred to Committee on Energy and Commerce; Ways and Means

H.R. 3259, *Non-Opioids Prevent Addiction In the Nation Act (NOPAIN) Act*
Rep. Terri Sewell (D-AL)

Temporarily establishes separate payments for certain non-opioid treatments under the Medicare prospective payment system for hospital outpatient department services and the payment system for ambulatory surgical center services. Applies to pain management treatments that are able to replace or reduce opioid consumption, as shown through clinical trials or data.

Co-Lead(s): Reps. David McKinley (R-WV), Ann McLane Kuster (D-NH), and Brian Fitzpatrick (R-PA)

Co-Sponsors: 53

Status: Referred to Committee on Energy and Commerce; Ways and Means



H.R. 3450, Medicaid Bump Act
Rep. Paul Tonko (D-NY)

Increase the federal reimbursement rate for mental and behavioral health care services under Medicaid.

Co-Lead(s): Rep. David Trone (D-MD)

Co-Sponsors: 3

Status: Referred to Committee on Energy and Commerce

H.R. 3514, Humane Correctional Health Care Act
Rep. Ann McLane Kuster (D-NH)

Repeals Medicaid Inmate Exclusion which bans states from using federal Medicaid funds for health services to incarcerated individuals. Providing Medicaid and its standard of care can improve prison and jail health systems by ensuring treatment for SUD and mental illness, protecting public health through treatment of infectious diseases, and reducing recidivism.

Co-Lead(s): Reps. Brian Fitzpatrick (R-PA), Suzanne Bonamici (D-OR), David McKinley (R-WV), Lisa Blunt-Rochester (D-DE), David Trone (D-MD)

Co-Sponsors: 14

Status: Referred to Committee on Energy and Commerce; Judiciary



H.R. 4203, *Improving Medicaid Programs' Response to Overdose Victims and Enhancing (IMPROVE) Addiction Care Act*
Rep. Markwayne Mullin (R-OK)

Establishes additional requirements for state Medicaid drug-use review programs with respect to individuals who experience opioid-related overdoses. Specifically, programs must include protocols that (1) connect individuals who have experienced an opioid-related overdose within the last five years to appropriate treatment; (2) notify providers who prescribe opioids about subsequent fatal overdoses; (3) ensure providers are notified about an individual's history of opioid use disorder, overdoses, or poisonings; and (4) educate providers about proper prescribing practices for these individuals.

Co-Lead(s): Rep. Harley Rouda (D-CA)

Co-Sponsors: 5

Status: Referred to the Committee on Energy and Commerce

H.R. 4824, *Stop Copay Overpay Act*
Rep. Chrissy Houlahan (D-PA)

Limit copayments for outpatient visits for mental health or behavioral health under the TRICARE program.

Co-Lead(s): Rep. Guy Reschenthaler (R-PA)

Co-Sponsors: 4

Status: Referred to Committee on Armed Services



WHERE WE'RE GOING

H.R. 1364, Parity Enforcement Act of 2021 **Rep. Donald Norcross (D-NJ)**

Provides authority for the Department of Labor to enforce the parity requirements for group health plans with respect to the coverage of mental health and substance use disorder benefits.

Co-Lead(s): Reps. Brian Fitzpatrick (R-PA), Ann McLane Kuster (D-NH), and Joe Courtney (D-CT)

Co-Sponsors: 12

Status: Referred to the House Committee on Education and Labor

H.R. 2264, Tele-Mental Health Improvement Act **Rep. David Trone (D-MD)**

Requires private health insurance plans that cover in-person mental health or substance use disorder services to cover such services on equal terms via telehealth during and shortly after the COVID-19 public health emergency.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 3

Status: Referred to the House Committee on Energy and Commerce; Ways and Means; Education and Labor



H.R. 3753, Parity Implementation Assistance Act
Rep. Tony Cardenas (D-CA)

Authorize \$25 million in grants to states to support their oversight of health insurance plans' compliance with mental health parity requirements, as long as states collect and review comparative analyses from insurers.

Co-Lead(s): Rep. Brian Fitzpatrick (R-PA)

Co-Sponsors: 10

Status: Referred to Committee on Energy and Commerce



WHERE WE'RE GOING

Road to Recovery Act

Rep. Brian Fitzpatrick (R-PA)

End Medicaid's Institutions for Mental Disease (IMD) exclusion for substance use disorder and helps to increase access for inpatient treatment for Medicaid and CHIP enrollees. The IMD exclusion is a long-standing policy that prohibits federal Medicaid matching funds to states for services rendered to Medicaid-eligible individuals who are patients for SUD and mental health treatment. Some states – including Pennsylvania – have used an “in lieu of services” provision allowing for inpatient treatment, but with limitations on patient population, facility size, and length of stay. These limitations disproportionately affect Medicaid beneficiaries.

Co-Lead(s): Rep. Ann McLane Kuster (D-NH)

End the Stigma Resolution

Rep. Dave Joyce (R-OH)

Recognize the importance of ending the stigma of substance use disorders.

Co-Lead(s): Rep. David Trone (D-MD)

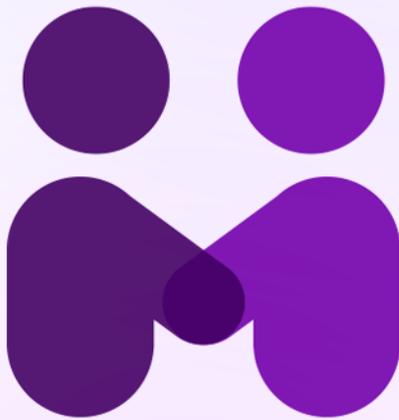


The Community Re-Entry through Addiction Treatment to Enhance (CREATE) Opportunities Act
Rep. Ann McLane Kuster (D-NH)

Establishes Medication-Assisted Treatment Corrections and Community Reentry Program in the Department of Justice. Under the program, the National Institute of Corrections may award grants to support local programs that provide medication-assisted treatment for incarcerated individuals who have an opioid-use disorder.

116th Congress Co-Lead(s): **Reps. Mike Turner (R-OH), Rep. Lisa Blunt Rochester (D-DE), and Rep. Jackie Walorski (R-IN)**





**2021
LEGISLATIVE
AGENDA**

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117TH CONGRESS

